

BLM OREGON/WASHINGTON EXIT INTERVIEW QUESTIONNAIRE

Dear Employee:

As you leave the Bureau of Land Management (BLM), we want to thank you for your contributions to the agency's work. We hope you have found your BLM experience rewarding.

It is our goal to create workplace environments which enable all employees to develop and contribute their abilities, and to support employees in working together to accomplish the Bureau's program objectives. We are sincerely interested in receiving your observations and input through the Exit Interview Questionnaire. We also encourage you to request a supplementary, confidential oral interview as indicated in the Questionnaire instructions.

We will analyze the input provided via the Exit Interviews, make the resulting data summaries available to our managers and employees, and use the data to make positive improvements to our work environments. As has been done with the Bureau Employee Surveys, the Exit Interview results will be presented in the form of statistical data plus identification of overall themes and trends derived from the narrative comments. The anonymity and confidentiality of your input will be carefully protected.

Thank you for participating in the BLM OR/WA Exit Interview. We wish you the best in your future endeavors.

Charles E. Wassinger
for Elaine Zielinski
State Director, BLM Oregon/Washington

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UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
OREGON/WASHINGTON

Exit Interview Questionnaire

Please complete the following questionnaire at the time you leave BLM. (This questionnaire can also be accessed and filled out through BLM OR/WA's Internet Information Page or the EEO Intranet Web site as an option.) In soliciting your input, the Bureau's purpose is to better understand the specific reasons departing employees leave the agency – especially reasons pertaining to the employee's career/work expectations and experiences, and to the BLM work environment. Please share your BLM work experiences with us, to help us make constructive changes in our workplace environments.

Completion of the questionnaire is voluntary, but we encourage your participation. The information you provide will be handled in a strictly confidential manner. (Please see the end of this form.) While completion of any questionnaire item is optional, full completion of the form will best support us in improving the workplace.

Please use extra sheets or space as needed for narrative explanation. Your assistance is appreciated.

Date _____ Name of BLM Field Office/SO Division _____

Job Title, Series and Grade: _____ Total BLM Length of Service: ____ yrs ____ mos

Appointment Type: (Check all that apply)

| | | |
|------------------------------------|---|-------------------------------|
| <input type="checkbox"/> Permanent | <input type="checkbox"/> Temp. Seasonal | <input type="checkbox"/> SCEP |
| <input type="checkbox"/> Term | <input type="checkbox"/> Temp. Limited | <input type="checkbox"/> STEP |

Are you in a Fire-related position? ☐ Yes ☐ No

Self-Identification (Optional): (Please check all that apply)

| | | |
|--|--|---|
| <input type="checkbox"/> Male | <input type="checkbox"/> Black (African American) | <input type="checkbox"/> American Indian/Alaskan Native |
| <input type="checkbox"/> Female | <input type="checkbox"/> Hispanic | <input type="checkbox"/> Disabled |
| <input type="checkbox"/> White (Caucasian) | <input type="checkbox"/> Asian American/Pacific Islander | <input type="checkbox"/> Over 40 |

Before this appointment, had you ever worked for BLM or another Federal agency? ☐ Yes ☐ No
(Please explain:) _____

If "Yes," what type of appointment did you have? (Check all that apply)

| | | |
|------------------------------------|---|-------------------------------|
| <input type="checkbox"/> Permanent | <input type="checkbox"/> Temp. Seasonal | <input type="checkbox"/> SCEP |
| <input type="checkbox"/> Term | <input type="checkbox"/> Temp. Limited | <input type="checkbox"/> STEP |

Were you in a Fire-related position? ☐ Yes ☐ No (Explain:) _____

(NOTE: All Temps, including STEPs, please skip Item 1 and continue with Items 2, 3, and 4.)

1. My reasons for leaving (For Permanents, Terms, and SCEPs) (Please check all boxes that apply):

| | |
|---|--|
| <input type="checkbox"/> a. Transfer within BLM | <input type="checkbox"/> g. Permanent Employment Opportunity |
| <input type="checkbox"/> b. Transfer to Another Federal Agency | <input type="checkbox"/> h. Higher Salary |
| <input type="checkbox"/> c. Transfer to Another Level of Gov't. | <input type="checkbox"/> i. Better Benefits |
| <input type="checkbox"/> d. Transfer to Private Sector | <input type="checkbox"/> j. Personal Reason |
| <input type="checkbox"/> e. Expiration of Appointment | <input type="checkbox"/> k. Other (Please explain) _____ |
| <input type="checkbox"/> f. Retirement | _____ |

(Please explain as needed:) _____

If you are leaving the BLM, is there something that might have kept you from leaving?

G Yes **G** No **G** Not Sure **G** Not Applicable (Please explain:) _____

If you are leaving the BLM, would you consider returning to work with BLM in the future?

G Yes **G** No **G** Not Sure **G** Not Applicable (Please explain:) _____

2. Respond to the following statements by checking the most appropriate block:

| <u>The Job</u> | Always | Usually | Seldom | Never |
|--|----------|----------|----------|----------|
| a. My job was challenging. | G | G | G | G |
| b. The assignments and responsibilities given me were appropriate. | G | G | G | G |
| c. My workload was too heavy. | G | G | G | G |
| d. My workload was too light. | G | G | G | G |
| e. I received appropriate training and professional development opportunities. | G | G | G | G |
| f. The balance between work quality and deadlines was appropriate. | G | G | G | G |
| g. Institutional memory and office records were adequate to provide me needed information pertaining to my work. | G | G | G | G |
| h. I received positive recognition for my work efforts. | G | G | G | G |
| i. There were suitable advancement opportunities available. | G | G | G | G |
| j. I felt I accomplished something with respect to the Bureau's programs. | G | G | G | G |

Please explain your ratings as necessary: _____

Supervisory Aspects

| | Always | Usually | Seldom | Never |
|--|--------|---------|--------|-------|
| k. My supervisor provided adequate guidance regarding my assignments. | G | G | G | G |
| l. My supervisor made performance expectations clear to me. | G | G | G | G |
| m. I could go to my supervisor as needed with work problems or concerns. | G | G | G | G |
| n. My supervisor was equitable and fair in dealing with me and my co-workers. | G | G | G | G |
| o. Personnel actions (hires, promotions, awards, training) were based on merit and not on race, sex, age, handicap or other prohibited or inappropriate basis. | G | G | G | G |

Please explain your ratings as necessary: _____

The Work Environment

| | Always | Usually | Seldom | Never |
|---|--------|---------|--------|-------|
| p. Working conditions in my workplace were good. | G | G | G | G |
| q. Co-workers were supportive and helped me learn about the area and the job. | G | G | G | G |
| r. The local community environment and quality of life were good. | G | G | G | G |
| s. I received help/support from the agency as needed. | G | G | G | G |

Please explain your ratings as necessary: _____

3. Suggestions for Improvements, regarding any of the subjects above: _____

4a. What did you like best about your job with BLM? _____

4 b. What did you like least about your job with BLM? _____

Please mail your completed Questionnaire using a Special Attention (blue) envelope to the BLM OR/WA EEO Manager (OR-956), or you may mail it using the U.S. Postal Service to OR/WA EEO Manager (OR-956), P.O. Box 2965, Portland, OR 97208. All completed Questionnaires will be securely filed in OR-956 to protect employee confidentiality. Your check-box responses will be consolidated in OR-956 as statistics for analysis with those of all other departing OR/WA employees. The narrative comments will be consolidated and used as a source for identification of overall Statewide trends and recurring themes. OR-956 will provide Statewide consolidated data periodically to managers and appropriate staff in a manner which carefully protects employee confidentiality and anonymity, while providing managers with information needed to evaluate and improve the workplace environment. Annually OR-956 will also issue, for the information of all employees, an Exit Interview Results Report summarizing data and identifying overall Statewide trends and recurring themes derived from narrative comments.

You are also encouraged to participate in a local oral Exit Interview expanding on the topics above. BLM OR/WA has established an Oral Exit Interview format and process. This interview may be with your immediate supervisor, your second or third level supervisor, or with a local Human Resources Specialist, EEO Coordinator, CORE Specialist or Mentor. Please contact a supervisor, your Servicing HR Specialist, or EEO Coordinator to express your interest. Your participation in the oral interview is voluntary, but we encourage you to request an interview. As with this Questionnaire, the Oral Exit Interview process calls for submission of the completed Interview Report directly to OR-956 to protect employee anonymity and confidentiality.

Again, thanks for your participation in the Exit Questionnaire and Interview process, and for your contributions to BLM's work. The Bureau wishes you the best in your future endeavors.

Bureau Processing Instructions

The manager, supervisor or other staff person who provides the employee the paperwork associated with his/her departure also provides the employee this Questionnaire. (As an option, the departing employee may also fill out the Questionnaire using the electronic format provided through BLM OR/WA's Internet Information Page or the EEO Intranet site.) Departing employees include permanent and term employees, SCEPs, STEPs, and other temporary employees – all employees who are not scheduled to return to their present office under a currently known appointment. Include employees who are retiring.

If requested, a supervisor, Servicing HR Specialist, or EEO Coordinator should assist the departing employee in obtaining a companion Oral Exit Interview with the supervisor or other individual chosen by the departing employee in accordance with the information provided to the employee above. The individual conducting the interview will use the OR/WA Oral Exit Interview Format, Form OR-1400-33a.